



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6424

| | | | | |
|-----------------------------|--|--------------|------------------------|---|
| SERIAL NUMBER 10/753,461 | FILING OR 371(c) DATE 01/09/2004 RULE | CLASS 623 | GROUP ART UNIT 3731 | ATTORNEY DOCKET NO. PA1776 US (1737.2770000) |
|-----------------------------|--|--------------|------------------------|---|

APPLICANTS

Justin Goshgarian, Santa Rosa, CA;

** CONTINUING DATA *****

None *TM*
None *TM*

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/20/2004

| | | | | | |
|---------------------------------|---|--|-------------------------------|--------------------|-------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CA | SHEETS DRAWING 10 | TOTAL CLAIMS 34 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i> | Examiner's Signature <i>[Signature]</i> | Initials <i>[Initials]</i> | | |

ADDRESS

28390

TITLE

Ostium stent system

| | | |
|-----------------------------|---|---|
| FILING FEE RECEIVED 1022 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------|---|---|